

## Authorization to Redirect Your Direct Deposits and Automatic Withdrawals

Please complete and sign below and County National Bank will contact the appropriate parties to redirect your automatic transactions. Please fill out one form for each transaction (additional forms may be printed from our website [www.CountyNationalBank.com](http://www.CountyNationalBank.com) or picked up at any of our offices).

I authorize (Company Name) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Account # \_\_\_\_\_ Effective Date \_\_\_\_\_

to redirect my existing (check one)  *Direct Deposit*  *Automatic Withdrawal* to my **County National Bank** checking/savings (circle one) with account number # \_\_\_\_\_. I understand that it may take up to 30 days to process this request. My signature below authorizes this request.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Signature \_\_\_\_\_ Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ ACH Routing/Transit Number: 072402694

**County National Bank**, Attn: Customer Service, One S. Howell St., Hillsdale, MI 49242 Phone (517)439-4300

## Authorization to Close Account

Please complete and sign to allow **County National Bank** to contact your previous financial institution to close your account.

Financial Institution Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_

This form is your authorization to close checking/savings (circle one) with account number \_\_\_\_\_ and forward the balance to **County National Bank** at the address below. Please make the check payable to **County National Bank** for the benefit of:

Customer Name \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Joint Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send check to: **County National Bank**, Attn: Customer Service, One S. Howell St., Hillsdale, MI 49242 Phone (517)439-4300